РТО	1391	(REV	10-83)	- EKC

ATTORNEY DOCKET

Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY DOCKET
	82636NAB

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Se	nd Corresp	ondence to: Patent Legal	Staff	Direct Telephone Calls to: (name and telephone number)
		Eastman Ko 343 State St	Nelson A. Blish	
Rochester, NY			TY 14650-2201	(585) 588-2720 FAX: (585) 477-4646
2	FULL NAME OF INVENTOR	FAMILY NAME Nelson	FIRST GIVEN NAME David	SECOND GIVEN NAME J.
۰	RESIDENCE & CITIZENSHIP	Rochester	STATE OR FOREIGN COUNTRY New York 14612 USA	COUNTRY OF CITIZENSHIP Great Britian
1	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2	FULL NAME OF INVENTOR	FAMILY NAME Silverstein	FIRST GIVEN NAME Barry	SECOND GIVEN NAME D.
0	RESIDENCE & CITIZENSHIP	Rochester	STATE OR FOREIGN COUNTRY New York 14618 USA	COUNTRY OF CITIZENSHIP USA
2	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	New York 14650 USA
2	FULL NAME OF INVENTOR	FAMILY NAME Fowlkes	FIRST GIVEN NAME William	SECOND GIVEN NAME Y.
0	RESIDENCE & CITIZENSHIP	Pittsford	STATE OR FOREIGN COUNTRY New York 14534 USA	COUNTRY OF CITIZENSHIP USA
3	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
4	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIÇÎNATURE OF INVENȚOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
Hard I have	Bon AA.	Wings
DATE /	DATE	DATE
12/21/2001	1/02/2002	12/27/01
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE
I	II	II